ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		09	20400
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<u> </u>	

INDEX OF CLAIMS

,	Rejected	N .	Non-elected
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If more than 150 claims or 10 actions staple additional sheet here

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